

# Work Order ID 74369

Wednesday, September 28, 2011 4:06:10 PM



Page 1

Item ID: D206-642-114

Accept



Setup Start



Revision ID:

Item Name: Skidtube RH

Stop



Start Date: 10/18/2011 Start Qty: 1.00



Cust Item ID:

Required Date: 11/11/2011 Req'd Qty: 1.00



Customer:

Reference:

Approvals: Process Plan: MF Date: 11-09-28

Tooling:

Date:

Run Start



QC: \_\_\_\_\_

Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_

Date: \_\_\_\_\_

Stop



Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
IIN-D206-642	O								

100

0.00



DOCUMENT CONTROL

DC

Memo

0.00

Document Control

Photocopy bluefile & type labels per PPP206-642-114

CHG001

CHC7002

*Sulalag*

*M.C. 11/10/26*

110

0.00



Pick Kit

Packaging

Memo

0.00

Packaging

*11/11/26*

120

0.00



QC4- 100% Inspect kits for completeness

QC

Memo

0.00

Quality Control

*Sulalag*

**B 74 195 RH**

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector	

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

**Work Order ID 74369**

Wednesday, September 28, 2011 4:06:10 PM



Page 2

Item ID: D206-642-114

Accept



Setup Start



Revision ID:

Item Name: Skidtube RH

Stop



Start Date: 10/18/2011 Start Qty: 1.00



Cust Item ID:

Required Date: 11/11/2011 Req'd Qty: 1.00



Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start



Stop



Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 	Packaging	0.00							
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPPD206-642-114 Location: _____ PPP Rev: <u>A</u>								
140 	QC21- Final Inspection - Work Order Release	0.00							
QC	Memo	0.00							
Quality Control									

*C. C. C.*

*n/n/11*

*MF*  
*11-11-11*

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Picklist Print

Wednesday, September 28, 2011 4:06:07 PM

Page 1

Work Order ID: 74369

Parent Item: D206-642-114

Parent Item Name: Skidtube RH



Start Date: 10/18/2011



Required Date: 11/11/2011

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP REV:A 10.12.08 PER REV:N DD VERF:EC  
11.09.23 ADDED K10112 DD VERF:EC

IPP REV:B

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D206-642-151 		Manufactured	No			110	Each	0.0000	1	1			
Replacement Skidtube K10112 <i>CHC7003</i> 		Manufactured	No			110	Each	0.0000	1	1			
Saddle, Skidtube 206													

74155 *[Signature]*

75849 *[Signature]*

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries